

STATEMENT OF
DR. ROSEMARIE DIMAURO SATYSHUR
EXECUTIVE DIRECTOR OF THE
SOCIAL SERVICES ADMINISTRATION
BEFORE THE
HOUSE APPROPRIATIONS COMMITTEE
SUBCOMMITTEE ON HEALTH AND HUMAN RESOURCES
FY 2005 BUDGET

FEBRUARY 18, 2004

STATEMENT OF
DR. ROSEMARIE DIMAURO SATYSHUR
EXECUTIVE DIRECTOR OF THE
SOCIAL SERVICES ADMINISTRATION
BEFORE THE
SENATE BUDGET AND TAXATION COMMITTEE
SUBCOMMITTEE ON HEALTH, EDUCATION AND HUMAN RESOURCES
FY 2005 BUDGET
FEBRUARY 23, 2004

GOOD AFTERNOON, I AM DR. ROSEMARIE DiMAURO SATYSHUR, EXECUTIVE DIRECTOR OF THE SOCIAL SERVICES ADMINISTRATION (SSA) IN THE DEPARTMENT OF HUMAN RESOURCES (DHR). THANK YOU FOR THE OPPORTUNITY TO SHARE THE CHILD WELFARE SERVICES MISSION, ACCOMPLISHMENTS AND OPPORTUNITIES.

MISSION AND PURPOSE

THE MISSION OF SSA IN MARYLAND IS TO SUPPORT AND ENABLE LOCAL DEPARTMENTS OF SOCIAL SERVICES, IN COOPERATION WITH COMMUNITY PARTNERS, TO EMPLOY STRATEGIES TO PREVENT CHILD ABUSE AND NEGLECT, PROTECT VULNERABLE CHILDREN, SUPPORT FAMILY STABILITY AND PROMOTE CUSTOMER INDEPENDENCE. THE SSA GUIDING PRINCIPLE IS THAT ALL CHILDREN DESERVE TO LIVE HEALTHY AND VIOLENCE-FREE WITH FAMILIES WHERE THEY ARE SAFE FROM PHYSICAL AND MENTAL HARM. SSA IS RESPONSIBLE FOR CHILD WELFARE POLICY DEVELOPMENT, MONITORING AND EVALUATION, AS WELL AS TRAINING AND STAFF DEVELOPMENT.

THE SSA GOALS UNDERGIRD THE DHR PLAN FOR MARYLAND'S CHILDREN:

1. TO BE SAFE FROM ABUSE AND NEGLECT;
2. TO RESIDE IN PERMANENT HOMES; AND
3. TO RECEIVE APPROPRIATE SOCIAL SERVICES CONSISTENT WITH THEIR OVERALL WELL-BEING.

FY 2005 CHILD WELFARE GOALS AND OBJECTIVES

SSA 2005 GOALS FOR SERVICE PERFORMANCE PROMOTE BEST PRACTICES TO CHILDREN AND FAMILIES. IN 2003-2004 WE CONDUCTED STATE AND FEDERAL CHILD AND FAMILY SERVICES REVIEWS AND PROGRAM IMPROVEMENT PLANNING TO ADVANCE SYSTEMS THAT IMPROVE STATEWIDE DATA COLLECTION AND AVAILABILITY, CASE REVIEW AND QUALITY ASSURANCE. WE CONTINUED WITH EFFORTS TO PROVIDE FOR STAFF TRAINING; TO ENHANCE COMMUNITY PARTNERSHIPS; TO PROMOTE FOSTER PARENT RECRUITMENT AND RETENTION; AND TO IMPROVE SERVICES OVERALL. THE CONTINUATION OF STRATEGIES TO ACHIEVE SSA MANAGING FOR RESULTS (MFR) GOALS AND OBJECTIVES THROUGHOUT 2005 WILL ASSURE THAT CHILD WELFARE SERVICES ARE MEASURED AND EVALUATED. WE WILL CONTINUE EFFORTS TO IMPLEMENT A STATEWIDE AUTOMATED CASE MANAGEMENT SYSTEM, IMPROVE CASE PLANS TO BETTER ASSIST COURT DECISIONS, EXPLORE FEDERAL WAIVER OPPORTUNITIES, ATTAIN CASELOAD STANDARDS, PARTNER WITH OTHER AGENCIES FOR INTEGRATED MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES, PROVIDE TRAINING TO ENHANCE STAFF COMPETENCIES, AND CLOSE PERFORMANCE GAPS USING QUALITY IMPROVEMENT PROCESSES AND STRATEGIC PLANNING.

FY 2003 AND FY 2004 PROGRAM HIGHLIGHTS AND INNOVATIONS

SSA PRIORITY IS EXCELLENCE IN SERVICES LINKED TO CHILD SAFETY, PERMANENCY AND WELL-BEING. CHILD WELFARE PROGRAMS, SUCH AS CHILD PROTECTIVE SERVICES, FOSTER CARE AND ADOPTION SERVE CHILDREN, YOUTH, AND FAMILIES WHO HAVE EXPERIENCED A CRISIS OR ARE AT RISK OF HARM OR FAMILY DISRUPTION. AS NEEDED, ASSISTANCE IS PROVIDED THROUGH IN-HOME (CHILD PROTECTIVE) AND OUT-OF-HOME (KINSHIP CARE, FOSTER CARE, ADOPTION) PROGRAMS.

IN-HOME SERVICES

CHILD PROTECTIVE SERVICES IS THE SPECIALIZED SERVICE TO CHILDREN AND THEIR FAMILIES WHERE NEGLECT, PHYSICAL ABUSE OR SEXUAL ABUSE IS ALLEGED. INVESTIGATIONS AND SERVICES ARE PROVIDED BY LOCAL DEPARTMENTS OF SOCIAL SERVICES. THE PRIMARY FOCUS OF SERVICES IS TO ASSURE THE SAFETY AND WELL-BEING OF CHILDREN IN THEIR HOMES. SERVICES ARE DELIVERED TO PARENTS OR CAREGIVERS AND ARE DESIGNED TO ENABLE THEM TO PROVIDE CARE FOR THEIR CHILDREN IN A SAFE AND PROTECTIVE ENVIRONMENT. STAFF TRAINING AND COMMUNITY OVERSIGHT ARE CRITICAL COMPONENTS IN THE SYSTEM OF CHILD SAFETY.

INVESTIGATIONS AND SERVICES

- APPROXIMATELY 32,900 INVESTIGATIONS OF REPORTED NEGLECT OR ABUSE

WERE CONDUCTED IN FY 2003, AN INCREASE OVER THE PREVIOUS YEAR.

- 5, 267 FAMILIES RECEIVED IN-HOME FAMILY SERVICES DESIGNED TO PROMOTE
CHILD SAFETY.
- MORE THAN 90% OF CHILDREN IN FAMILIES RECEIVING IN-HOME FAMILY
SERVICES REMAIN IN THEIR HOME 12 MONTHS AFTER THE END OF
SERVICE.

CITIZEN REVIEW TEAM TRAINING AND RESOURCES

- WE CONTINUE TO ENCOURAGE CITIZEN REVIEW OF THE STATE'S CHILD
PROTECTION SYSTEM. LOCAL DEPARTMENTS AND SSA PROVIDE
TRAINING AND
RESOURCE MATERIALS FOR CITIZEN REVIEW PANELISTS TO EDUCATE
THEM ON
THE CHILD WELFARE SYSTEM, LAWS AND POLICIES.
- LINKS BETWEEN CHILD WELFARE AND JUVENILE SERVICES
WE RECOGNIZE THAT DHR AND DEPARTMENT OF JUVENILE SERVICES
OFTEN
WORK WITH THE SAME CHILDREN AND FAMILIES. HOWEVER, OUR
MISSIONS
ARE NOT THE SAME. DESPITE THIS DIFFERENCE IN FOCUS, WE ARE
COMMITTED
TO WORKING TOGETHER TO PROMOTE BEST PRACTICES. DURING FY 2002
– FY
2003, SSA TRAINED OVER 300 DJS STAFF TO IDENTIFY INCIDENCES OF
ALLEGED
CHILD ABUSE AND NEGLECT IN DJS FACILITIES AND TO REPORT THEM TO
LOCAL DEPARTMENTS OF SOCIAL SERVICES. TRAINING WILL BE OFFERED
AGAIN IN 2004-2005.

➤ SAFETY AND RISK ASSESSMENT TOOLS

MARYLAND HAS DEVELOPED TWO TOOLS TO BETTER ASSESS SAFETY AND RISK

CONCERNS WHEN CHILD ABUSE OR NEGLECT IS ALLEGED. FIRST, SAFETY

ASSESSMENT FOR EVERY CHILD (SAFE-C) IDENTIFIES IMMINENT DANGERS TO

CHILDREN—THREATS TO THEIR PHYSICAL OR OVERALL WELL-BEING THAT

DEMAND IMMEDIATE INTERVENTION. SECOND, THE MARYLAND FAMILY RISK

ASSESSMENT (MFRA) TOOL IS USED TO ASSIST SOCIAL WORKERS DETERMINE IF

RISK OF CONTINUED MALTREATMENT REQUIRES FURTHER SERVICE

INTERVENTION. BOTH TOOLS WERE DEVELOPED BY A MULTI-DISCIPLINARY

WORKGROUP, INCLUDING THE NATIONAL RESOURCE CENTER ON CHILD ABUSE

AND NEGLECT, AND ARE USED BY BOTH INVESTIGATION AND ON-GOING

SERVICES WORKERS. BEGINNING FEBRUARY 2004, TRAINING ON RISK-BASED

SERVICE PLANNING DELIVERED BY THE UNIVERSITY OF MD SCHOOL OF SOCIAL

WORK'S TRAINING DIVISION IS TO OCCUR.

OUT-OF-HOME SERVICES

OUT-OF-HOME SERVICE PROGRAMS ARE FOR THE PLACEMENT OF CHILDREN WHO CANNOT SAFELY REMAIN IN THEIR HOMES. WHILE KINSHIP CARE

(PLACEMENT WITH RELATIVES) AND FOSTER CARE ARE TEMPORARY SUPPORTIVE

SERVICES FOR CHILDREN UNABLE TO LIVE AT HOME; ADOPTION SEEKS A PERMANENT, “FOREVER FAMILY.” KINSHIP CARE RELIES ON RELATIVES AS A FIRST

LINE IN PERMANENCY PLANNING FOR CHILDREN IN STATE CUSTODY.

COLLABORATIONS WITH COMMUNITY AND FAITH-BASED ORGANIZATIONS HAVE

INCREASED POSITIVE OUTCOMES FOR CHILDREN IN OUT-OF-HOME CARE.

KINSHIP POPULATION

➤ OVER 90% OF CHILDREN RECEIVING KINSHIP CARE SERVICES RESIDE IN BALTIMORE CITY. THE NUMBER OF KINSHIP PLACEMENTS HAS REMAINED

STABLE DUE TO RELATIVES OPTING TO ADOPT OR ACCEPT GUARDIANSHIP, THE

PURSUIT OF REUNIFICATIONS WITH FATHERS, AND THE DEPARTMENT’S FOCUS

ON SAFELY PRESERVING FAMILIES.

➤ IN COLLABORATION WITH THE DISTRICT OF COLUMBIA’S DIVISION OF CHILDREN AND FAMILY SERVICES, SSA DEVELOPED A PROTOCOL FOR THE

PLACEMENT OF DISTRICT CHILDREN IN MARYLAND’S KINSHIP HOMES AND

CONTINUES TO PARTNER TO ASSURE THE WELL-BEING OF OTHER DC CHILDREN

PLACED IN MARYLAND HOMES.

KINSHIP RESOURCES

➤ THE KINSHIP CARE RESOURCE CENTER, LOCATED IN THE COMMUNITY HEALTH CENTER AT COPPIN STATE COLLEGE IS IN ITS FOURTH YEAR. THE RESOURCE CENTER PROVIDES A VARIETY OF SERVICES FOR RELATIVES CARING

FOR KIN, SUCH AS A TELEPHONE HOTLINE FOR INFORMATION AND REFERRAL,

SUPPORT GROUPS, HEALTH SERVICES, LEGAL ASSISTANCE AND FAMILY ACTIVITIES.

➤ IN PARTNERSHIP WITH THE CORPORATION FOR NATIONAL AND COMMUNITY

SERVICE, VISTA VOLUNTEERS ARE ASSISTING SSA IN MEETING THE NEEDS OF

KINSHIP CAREGIVERS.

FOSTER CARE FAMILY TO FAMILY MODEL

➤ FAMILY TO FAMILY SEEKS TO IDENTIFY PLACEMENT RESOURCE HOMES WITHIN THE COMMUNITY FROM WHICH THE CHILD IS REMOVED TO REDUCE DISRUPTION IN A CHILD'S LIFE. COMMUNITY PLACEMENT ENABLES A CHILD TO CONTINUE RELATIONSHIPS WITH RELATIVES, FRIENDS, NEIGHBORS, RECREATION TEAMS, SCHOOL CLASSMATES, AND MEMBERS OF FAITH ORGANIZATIONS.

ADOPTION SERVICES

➤ AN ESTIMATED 900 FINALIZED ADOPTIONS THROUGH LOCAL DEPARTMENTS

ARE PROJECTED FOR SFY 2003. THOUGH LESS THAN THE 952 ACHIEVED IN FY

2002, THIS NUMBER IS MORE CONSISTENT GIVEN CURRENT STAFFING RESOURCES. THE NUMBER OF FINALIZED ADOPTIONS RECORDED FOR SFY

2003 IS 764.

➤ ANNUAL ADOPTION CELEBRATIONS HELD IN NOVEMBER OBSERVED THE ACHIEVEMENTS OF CHILDREN, CAREGIVERS AND STAFF AND WIDENED PUBLIC EXPOSURE TO THE *FOREVER FAMILIES* CONCEPT.

➤ THE MARYLAND ADOPTION RESOURCE EXCHANGE (MARE) DATABASE IS ACCESSIBLE TO ALL LOCAL DEPARTMENTS. AS PART OF COST CONTAINMENT

EFFORTS, DHR CHILD PLACEMENT AND ADOPTION RECRUITMENT CONTRACTORS ACCESS THE MARE DATABASE THROUGH LOCAL DEPARTMENTS.

➤ IN 2003 MARYLAND RECEIVED AN AWARD OF \$712,000 IN FEDERAL ADOPTION INCENTIVE MONIES FOR INCREASING THE NUMBER OF

ADOPTIONS. MARYLAND RECEIVED THE 6TH LARGEST AWARD OF THE TWENTY-

FIVE STATES TO RECEIVE THEM. OVERALL, THERE WAS A 75% INCREASE IN ADOPTIONS FROM 1997-2002.

ONE CHURCH ONE CHILD FAITH-BASED PARTNERSHIP

➤ A CONTRACT WITH ONE CHURCH ONE CHILD (OCOC) OF MARYLAND, INC., TO SERVE AS THE COMMUNITY ARM OF THE OCOC ADOPTION

PROGRAM, HAS FACILITATED A PARTNERSHIP OF CLERGY LEADERSHIP AND THE

EXPERTISE AND RESOURCES OF ADOPTION STAFF TO SECURE HOMES

FOR WAITING CHILDREN. OCOC FUNCTIONS ON THE PRINCIPAL THAT IF EVERY

CHURCH WOULD ASSIST IN THE ADOPTION OF ONE CHILD THERE WOULD BE NO

WAITING CHILDREN. TEN OCOC SUPPORT GROUPS STATEWIDE PROVIDE

PEER SUPPORT AND INFORMATIONAL RESOURCES TO PROSPECTIVE

ADOPTIVE FAMILIES RECRUITED THROUGH AFRICAN-AMERICAN FAITH-

BASED ORGANIZATIONS. VISTA VOLUNTEERS FROM THE CORPORATION

FOR NATIONAL AND COMMUNITY SERVICES ALSO ASSIST OCOC IN MEETING

PROGRAM GOALS. NEWLY DEVELOPED TRACKING TOOLS WILL BETTER

DOCUMENT OCOC PROGRAM OUTCOMES.

PROGRAM CHALLENGES AND OPPORTUNITIES

WE UTILIZE INNOVATION IN PRACTICE, NATIONALLY RECOGNIZED

STANDARDS, AND MULTI-FACETED APPROACHES TO GAIN POSITIVE

OUTCOMES FOR CHILDREN, FAMILIES AND COMMUNITIES.

AUTOMATION

THE MARYLAND CHILDREN'S ELECTRONIC SOCIAL SERVICES INFORMATION

EXCHANGE (MD CHESSIE) IS AN AUTOMATED INFORMATION SYSTEM FOR

MARYLAND CHILD WELFARE. MD CHESSIE IS SCHEDULED FOR

STATEWIDE IMPLEMENTATION IN FY 2006 WITH COMPLETION IN 2007.

DELOITTE CONSULTING IS THE CONTRACTOR FOR SYSTEM DEVELOPMENT

AND IMPLEMENTATION. MAXIMUS, INC., THE MONITORING CONTRACTOR, PROVIDES QUALITY CONTROL AND QUALITY ASSURANCE AND MD CHESSIE WILL PROVIDE IMPROVED FINANCIAL CONTROLS FOR SERVICES PURCHASED BY THE DEPARTMENT FOR CHILDREN AND WILL SATISFY FEDERAL REPORTING REQUIREMENTS OF THE ADOPTION AND FOSTER CARE ANALYSIS AND REPORTING SYSTEM (AFCARS) AND THE NATIONAL CHILD ABUSE AND NEGLECT DATA SYSTEM (NCANDS). IN 2003 SSA COMMITTED TO ENSURE FULL USE BY CHILD WELFARE STAFF OF THE PERSONAL DIGITAL ASSISTANTS (PDA). THESE DEVICES WILL SUPPORT CASEWORKERS IN TAKING DATE-STAMPED PHOTOGRAPHS AND NOTE-TAKING DURING FIELD VISITS. STATEWIDE TRAINING WAS PROVIDED AND PDAs ISSUED TO EVERY LOCAL DEPARTMENT. A PDA TASK FORCE HAS EXAMINED POLICIES AND MADE RECOMMENDATIONS FOR FUTURE INTERFACE WITH THE STATEWIDE AUTOMATED SYSTEM (MD CHESSIE).

STAFFING

OUR OBJECTIVE IS SUFFICIENT LOCAL DEPARTMENT STAFF TO ACHIEVE CHILD WELFARE LEAGUE OF AMERICA CASELOAD STANDARDS STATEWIDE. TO ADDRESS CURRENT VACANCIES, FORTY GRADUATES OF THE UNIVERSITY OF MARYLAND SCHOOL OF SOCIAL WORK IV-E PROGRAM WERE HIRED IN 2003. EXEMPTIONS TO THE HIRING FREEZE ARE GRANTED FOR POSITIONS VACATED DUE TO

RETIREMENTS, DISCIPLINARY TERMINATION, TRANSFER TO ANOTHER STATE AGENCY OR PROMOTION FROM WITHIN.

PERFORMANCE IMPROVEMENT PLANNING (PIP)

IN 2003 AND 2004 WE HAVE RESPONDED PROACTIVELY TO STATE AND FEDERAL

REVIEW MONITORING OF OUR PROGRAMS AND SERVICES. WE UNDERSTAND THAT

FAILURE TO ACHIEVE NECESSARY IMPROVEMENTS IN A REASONABLE TIMEFRAME

WILL RESULT IN SIGNIFICANT FINANCIAL PENALTIES. PIP DEVELOPMENT, IMPLEMENTATION AND REPORTING ARE THE INITIAL TOOLS USED FOR SYSTEM IMPROVEMENTS. WE WILL ALSO CONTINUE USING THE CHILD WELFARE AND ADULT SERVICES PERFORMANCE SYSTEM (CAPS). CAPS MEASURES

CHILD WELFARE SERVICE EFFECTIVENESS AND DOCUMENTS RESULTS IN LOCAL

DEPARTMENTS. IN ADDITION TO OUR FOCUS ON FINDINGS AND MONITORING

REQUIREMENTS OF THE 2003 FEDERAL CHILD AND FAMILY SERVICES REVIEW, THE

DEPARTMENT IS COMMITTED TO CONTAINING COSTS RELATIVE TO OUT-OF-HOME

PLACEMENT OF CHILDREN AND DEVELOPING AN EXIT STRATEGY FROM THE L.J.

MASSINGA FEDERAL COURT CONSENT DECREE IN BALTIMORE CITY.

KINSHIP CARE SUBSIDIZED GUARDIANSHIP WAIVER

AN EXTENSION OF THE WAIVER IS APPROVED THROUGH MARCH 2004.
THEREFORE,

THIS OPTION REMAINS AVAILABLE FOR KIN WHO ACCEPT PERMANENT
AND SAFE PLACEMENT OF RELATIVE CHILDREN. A MONTHLY SUBSIDY

(\$300) ASSISTS WITH THE COST OF CARE AND IS DERIVED FROM THE
FLEXIBLE USE

OF TITLE IV-E FUNDS FOR CHILDREN ASSIGNED TO THE PROJECT. THE
DEPARTMENT IS SEEKING A FIVE YEAR EXTENSION OF THE PROGRAM FROM
THE

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES.

SUBSTANCE ABUSE INITIATIVES

SUBSTANCE ABUSE INITIATIVES ARE RESPONSIVE TO THE COMPLEX
PROBLEMS

OF SUBSTANCE ABUSING FAMILIES WITH CHILDREN WHO COME TO THE

ATTENTION OF THE CHILD WELFARE SYSTEM. PROMOTING THE SAFETY
AND

WELL-BEING OF CHILDREN, SSA IMPLEMENTED SB512, CHILDREN IN NEED OF
ASSISTANCE –DRUG ADDICTED BABIES PROGRAM AND HB 7, INTEGRATION
OF

CHILD WELFARE AND SUBSTANCE ABUSE TREATMENT SERVICES. IN 2003
MORE

MOTHERS AND CHILDREN PARTICIPATED IN THE SB 512 PROJECT THAN THE
ANTICIPATED GOAL OF 300. SUBSTANCE ABUSE CROSS TRAINING THROUGH
THE

UNIVERSITY OF MARYLAND WAS PROVIDED FOR OVER 600 CHILD WELFARE
AND 100

ADDICTION SPECIALISTS.

THANK YOU FOR YOUR INTEREST IN THE SOCIAL SERVICES
ADMINISTRATION

AND MARYLAND'S CHILDREN AND FAMILIES.

Department of Human Resources

FY 2005 Budget Highlights

Social Services Administration

NB00.04

	<u>FY 2004</u> <u>Appropriation</u>	<u>FY 2005</u> <u>Allowance</u>	<u>Changes</u>
I. FUNDING^a			
General Funds	10,737,404	13,122,848	2,385,444
Special Funds	-	-	0
			(1,635,948
Federal Funds	14,231,807	12,595,859)
Reim. Funds	141,167	135,666	(5,501)
Total	<u>25,110,378</u>	<u>25,854,373</u>	<u>743,995</u>
II. PERSONNEL^a			
Regular Positions:	107.50	107.50	0.00
Contractual Positions:	0.00	0.00	0.00
III. MAJOR CHANGES (In Thousands)			
01 <u>Salaries, Wages and Fringe Benefits</u>			1,164
Increase in Salaries due to Worker's Compensation, \$1,414K; Reclassification, \$107K; Turnover Adjustment, \$61K; Accrued Leave Payout, \$50K; Deferred Compensation, \$41K; and Recovery of Efficiency Reduction, \$30K; Offset by Statewide Staff Reduction Initiative, (\$480K); and Health Insurance, (\$59K).			
02 <u>Technical & Special Fees</u>			0
03 <u>Communications</u>			0
04 <u>Travel</u>			0
07 <u>Motor Vehicles</u>			22
Increase in Motor Vehicle Replacement, \$21K; Repairs & Maintenance, \$2K; and Motor Vehicle/ Title Fee, \$1K; Offset by Gasoline & Oil, (\$2K).			
08 <u>Contractual Services</u>			0
12 <u>Stipends, Grants & Contributions</u>			0
08 <u>Contractual Services</u>			(491)

Decrease in Contractual Services due to DBM reduction for Office of Administrative Hearings costs.

13 Fixed Charges 48

Increase due to Foster Care Insurance for Non-State Treasurer's Office (Non-STO) Payment, \$83K; Offset by Insurance Premiums, per the Department of Budget & Management, for Tort Liability, Property Insurance and Office Employees premiums, (\$35K).

Other 1

Total 744

^a Reference Source: FY 2005 Maryland State Budget Book, Part II, Pages 436-439

Department of Human Resources

FY 2005 Budget Highlights

Foster Care Payments

NG00.01

	FY 2004 Appropriation	FY 2005 Allowance	Changes
I. FUNDING^a			
General Funds	133,255,507	172,523,936	39,268,429
Special Funds	235,205	142,657	(92,548)
Federal Funds	83,866,267	81,570,067	(2,296,200)
Reim. Funds	0	0	0
Total	217,356,979	254,236,660	36,879,681
II. PERSONNEL^a			
Regular Positions:	N/A	N/A	N/A
Contractual Positions:	N/A	N/A	N/A

III. MAJOR CHANGES (In Thousands)

Increase in Maintenance Payments resulting from :

Regular Foster Care:

Decrease due to reduced monthly caseload from (4,221 to 2,656), (\$9,706,818); (7,536)

Offset by Increased Average Payment for Regular Foster Care (from \$516.87 to \$585), \$2,171,439.36.

Institutional Foster Care:

Increase due to an increase in monthly Caseload from (1,691 to 1,975), 23,749
 \$20,259,162.72 and an increased Average Payment for Institutional Foster Care
 (from \$5,772.63 to \$5,944.59), \$3,489,412.32.

All Other Foster Care:

Decrease due to a reduction in monthly Caseload from (2,710 to 1,769), (13,015)
 (\$20,353,265.40); Offset by an Increased Average Payment for All Other Foster
 Care (from \$1,802.45 to \$2,148.16), \$7,338,731.88.

Adoptions:

Increase due to an increase in monthly Caseload (from 5,838 to 6,820), 8,159
 \$7,070,400 and Average Payment for Adoptions from (\$584.46 to \$600),
 (Anticipated caseload increase is associated with Subsidized Adoptions)
 \$1,088,670.24.

Funding Shift (GF) to reflect reduction in Title IV-E and unattainable Title XIX 25,523

Total

36,880

^a Reference Source: FY 2005 Maryland State Budget Book - Part II : Pages 476-477

Department of Human Resources

FY 2005 Budget Highlights

Child Welfare Services

NG00.03

	<u>FY 2004</u>	<u>FY 2005</u>	
	<u>Appropriation</u>	<u>Allowance</u>	<u>Changes</u>
I. FUNDING^a			
General Funds	60,844,309	69,453,248	8,608,939
Special Funds	8,987,570	967,198	(8,020,372)
Federal Funds	69,960,302	77,587,113	7,626,811
Reim. Funds	9,402,037	10,102,511	700,474
Total	149,194,218	158,110,070	8,915,852
II. PERSONNEL^a			
Regular Positions:	2,441.62	2,441.62	0.00
Contractual Positions:	0.00	0.00	0.00
III. MAJOR CHANGES (In Thousands)			
01 Salaries			7,673
Increase in Salaries due to Reclassification, \$3,376K; Health Insurance, \$2,030K;			
Cost of Living Adjustment, \$1,449K; Deferred Compensation, \$902K; Fringe Benefits,			

\$831K; Overtime for After Hour Coverage, \$651K; Accrued Leave Payout, \$322K; and Recovery of Efficiency Reduction, \$222K; Offset by Turnover Adjustment, (\$2,110K).

03	<u>Communications</u>	(3)
	Decreases in Telephones & DGS Reimbursement - Telecommunications.	
07	<u>Motor Vehicles</u>	268
	Increase due to Motor Vehicle Replacements, \$311K; Parking Space Rental, mainly in Carroll County, \$27K; and Maintenance/Repairs, \$7K; Offset by decreases in Gasoline/Oil, (\$76K) and Mileage Adjustments, (\$1K).	
08	<u>Contractual Services</u>	1,247
	Increase in Contractual Services funding for twenty-three (23) positions to provide Legal Services for Baltimore City DSS in Child Welfare and Adult Guardianship proceedings.	
	<u>Grants, Subsidies, and</u>	
12	<u>Contributions</u>	172
	Increase in Grants to Montgomery County Department of Health and Human Services by 2%.	
13	<u>Fixed Charges</u>	(441)
	Decreases in Fixed Charges for Non-DGS Rent Statewide, mainly in Baltimore City, Worcester and St. Mary's Counties, (\$386K); and Rent Paid to DGS, for Calvert and St. Mary's Counties, (\$366K); Offset by increases in Rent for Multi-Service Centers, mostly in Calvert and St. Mary's Counties, \$184K; and Lease Escalation, mainly in Baltimore City and Washington County, \$127K.	
	Total	<u><u>8,916</u></u>

^a Reference Source: FY 2004 Maryland State Budget Book - Part II: Pages 481-484

SSA
Accomplishments

Calendar Year 2003

Personal Digital Assistants (PDAs) assist workers: To ensure full use of PDAs to assist workers in documenting case activity, statewide training occurred and PDAs were issued to every local department. A Task Force examined PDA policies and made recommendations for full deployment. The devices will blend well with MD CHESSIE case management functions in supporting caseworkers who are able to take photographs and complete notes during field visits.

DHR Completes Child and Family Services Review. Maryland was the 47th state to complete the Child and Family Services Review (CFSR). The required review coordination teams were established in Baltimore City, Anne Arundel County and Allegany County. The State generally received positive comments on several aspects of our system, and the Department is awaiting a final report from the US Department of Health and Human Services.

Consent Decree Work Group Regroups: L.J. v. Massinga Consent Decree work group is planning steps to enable Baltimore City Department of Social Services to address persistent issues regarding child welfare and protection. The Baltimore City local department has been under federal consent decree since 1988, because of alleged severe deficiencies in foster care system.

Interstate Compact for the Placement of Children (ICPC) Is Discussed: The Department has provided updates to State and local legislators in Prince George's County regarding the illegal placement of foster children from the District of Columbia. Our intent is to forge a resolution to the problems resulting from the large number of District of Columbia children illegally placed in Maryland.

Maryland's prominence as a national leader in finalizing adoptions is unchanged: A 75% increase in the number of adoptions for the five-year period 1997- 2002 resulted in Maryland achieving the sixth largest federal adoption incentive funding award in 2003 of the 25 states to receive awards. These funds will be used to improve outreach efforts to accelerate adoption recruitment in Maryland.

DHR continues to seek and maximize Title-IV-E federal funding for Maryland: To prevent out-of-home placements and to ensure that placements, when unavoidable, are in the best interest of children, Title IV-E funds cover a significant portion of the cost of child welfare services. In State FY 2003, 65.7% of children in out-of-home-care were eligible for Title IV-E funds, resulting in \$131.3 million in claims. The Social Services Administration provides training, consultation, and technical assistance to local departments, to help achieve maximum federal funding.

Fiscal Year 2005 Budget

CHILD AND FAMILY SERVICES REVIEW (CFSR)

In January 2000, the United States Department of Health and Human Services adopted a new approach to monitoring state child welfare programs. The Children's Bureau which is part of the HHS Administration for Children and Families (ACF) is responsible for this review, which assesses states for substantial conformity with certain Federal requirements for child protective, foster care, adoption, family preservation/family support and independent living services.

The goal of the reviews is to help states to improve child welfare services and achieve specified federal outcomes that measure safety, permanency and well being for children and their families. Each review is a two-stage process that is comprised of a Statewide Assessment and an onsite review of programs and outcomes. The data profiles in the statewide assessment allow each state to compare performance on defined indicators with national standards established by the Children's Bureau. The onsite review is conducted by a joint team of federal and state staff and includes case record reviews, interviews with children and families and interviews with stakeholders, such as courts, foster families and community agencies. States determined at the end of the review not to be in "substantial conformity" will have the opportunity to develop and implement a Performance Improvement Plan. Failure to achieve necessary improvements in a reasonable timeframe will result in significant financial penalties.

Maryland completed the Statewide Assessment and it was submitted to the Regional ACF Office in September. The document can be accessed at the SSA section on the Department's website (www.dhr.state.md.us). The on-site portion of the review was conducted Nov 17 through Nov 21, in three locations – Baltimore City, Annapolis (Anne Arundel County) and Cumberland (Allegany County). Maryland was the 47th state to be reviewed and like all the others, some things are done well and some areas are in need of improvement. No state has achieved substantial conformity in all areas, and every state reviewed to date has had to develop a Performance Improvement Plan. A complete formal report of findings will be forwarded to the state, but some preliminary general results were presented in an exit briefing on Nov 21. Maryland's Family Preservation program received high marks, as did measures for child safety. Most of the improvements needed are in the area of permanency, primarily in timely achievement of reunification and adoption. And although we have some ability to capture data and we do have a quality assurance system, both are in need of upgrading if true improvement is to be made.

The next step is the development and implementation of a Performance Improvement Plan to address the areas in need of improvement. This plan must be submitted to ACF within 90 days of the receipt of the final report. Preliminary work, based on the results

presented to us verbally, has already begun. Goals negotiated with our federal partners must be achieved within two years; financial penalties are suspended during that time period. At the end of two years, if the goals are met, penalties are forgiven. If this is not the case, substantial penalties attach. Maryland embraces the process and looks forward to continuing to engage stakeholders in developing strategies to achieve improved outcomes for children and their families.

SB 458 – CHILDREN WITH DISABILITIES – VOLUNTARY PLACEMENTS

- On January 17, 2002, Governor Ehrlich signed an Executive Order regarding custody, relinquishment, and access to services for children. This order identified the urgent need for alternatives to the practice of requiring parents to relinquish custody of their children with significant and complex mental health needs and/or developmental disabilities in order to access services.
- Effective October 1, 2003, SB 458 expands the definition of Voluntary Placements to include situations where treatment is being sought for a child with a developmental disability or mental illness. The purpose of the Voluntary Placement is to provide treatment or care related to the child's disability that the parent is unable to provide.
- An additional relevant legislative initiative, House Bill 532 – Central Registry – Exception, was passed in 2003 and signed by Governor Ehrlich to prohibit families from being placed on the Child Abuse Central Registry when they refuse to take a child home from a psychiatric hospital or other facility because of a reasonable fear for the safety of the child or other family members.
- SB 458 requires that parents with a child that has a developmental disability or mental illness who needs an out-of-home placement for treatment be given the opportunity to enter into a voluntary placement agreement with the local department of social services. A voluntary placement hearing must be held in order to render a judicial finding prior to the 180th day in placement, and at regular intervals thereafter. SB 458 prohibits the local department from seeking legal custody of a child solely because of the developmental disability or mental illness. However, federal law requires that the local department be given responsibility for "placement and care", allowing the local department to make placement decisions about the child.
- SB 458 defines voluntary placement agreements as binding written agreements "voluntarily entered into" between local departments of social services and parents or guardians of the child and approved by DHR's Social Services Administration.
- Non-SB 458 Voluntary placements, now called "Time-Limited" Voluntary Placements, may be requested by a family with a child but are limited to 180 days or less. If the family cannot reunite with the child within the 180 days, the local department must file a petition for custody of the child.
- Department of Human Resources' Social Services Administration, in partnership with the Attorney General's Office, Department of Health and Mental Hygiene, the Governor's Office for Children, Youth and Families, local departments of social services, and child advocacy groups have held extensive discussions in order to plan, develop and coordinate the implementation of SB 458. Consideration has been given to Council recommendations that were made to the Governor pursuant to the Executive Order regarding access to services for families affected by SB458.

- The Social Services Administration has developed two directives to local departments to assist in implementation of SB 458: one directive was issued for “Time Limited Voluntary Placement” and another for “Children with Disabilities -Voluntary Placement Agreements”. Included in the directives are attachments for scheduling an assessment meeting, Interagency Team meeting, executing either a Time-Limited or Children with Disabilities – Voluntary Placement agreements, conducting Safety and Risk Assessments, and information about court intervention and contact persons at the Social Services Administration.
- Emergency Regulations for Out-of-Home Placement Services – Voluntary Placements are currently being prepared regarding the placement of children under SB 458 guidelines.
- Issues still facing the Social Services Administration regarding these laws involve the following areas:
 - Local Departments of Social Services need support in the development of placement resources to meet the needs of this special population.
 - Guidelines are needed from the Maryland State Department of Education and Local Boards of Education regarding payment for educational services for children placed in an out-of-home placement.
 - Appropriate statistics and record keeping are needed for Children with Disabilities-Voluntary Placements. Current statewide data through December 2003 is as follows:

Voluntary Placement Agreements					
Month	# phone calls	# Requested	# Approved	# Disapproved	# Pending
October-03	33	12	5	2	5
November-03	30	6	1	1	4
December-03	28	9	9	0	0
Total	91	27	15	3	9

INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN
AND THE DISTRICT OF COLUMBIA

The Issue: Children in the care and custody of the District of Columbia's Child and Family Services Agency (CFSA) are often placed in Maryland homes without the approval of the Interstate Compact on the Placement of Children (ICPC). This is a violation of the regulations and procedures established by the Interstate Compact on the Placement of Children (ICPC) which govern the interstate placement of children. Maryland has attempted to work with the District of Columbia's to ensure that all such placements are made in accordance with the ICPC regulations which requires the approval of the receiving State prior to the placement of the child. Unfortunately, the placement of DC children in Maryland homes without ICPC involvement or approval continues.

CFSA maintains about 3,000 children in foster care of which an average of 1,500 are placed in Maryland. This places a drain on Maryland resources in many ways: (1) It limits potential placement resources, i.e., family foster homes, in Maryland for Maryland children; (2) It raises the costs of care for Maryland because local departments are often forced to place Maryland children in higher cost group facilities due to a lack of sufficient family foster homes; (3) It increases the need for educational and recreational resources in the Maryland jurisdictions in which these DC children reside. The problem is particularly acute in Prince George's County where most of the DC's CFSA children reside.

History: The District of Columbia joined the Interstate Compact on the Placement of Children (ICPC) on September 10, 1989. Prior to joining the Compact, there was a reciprocal agreement between the District of Columbia and Maryland which allowed Maryland and DC private agencies to operate in each other's jurisdiction. In January 1993, the Maryland Compact Administrator advised all private agencies in the District of Columbia that, in order to continue to operate in the State of Maryland, they would need to become licensed by the Maryland Department of Human Resources (DHR). These agencies were recently reminded that the reciprocal agreement had ended "several years ago and we are now bringing these practices into compliance with the Code of Maryland Regulations (COMAR) 07.02.13.03(A-B)."

From June 1997 until October 1999, Maryland ICPC staff worked with the DC's CFSA officials to process all placements through the Maryland ICPC office. Numerous meetings were held from 1998 to October 1999 to discuss the issues and dangers resulting from the illegal placement of DC children in Maryland. On October 20, 1999 a meeting was held with the Maryland ICPC staff and Curtis Hardrick, Deputy Compact Administrator for CFSA. It was agreed that the District would operate within ICPC regulations.

In August 2002, an interim agreement was reached between the State of Maryland and the District of Columbia pertaining to the Interstate Compact on the Placement of Children. The District of Columbia made a commitment to follow the Compact and rectify the mistakes of the past. The agreement took a regional approach to the goals of child safety, permanency and well-being. It also addressed the concerns of both DC and Maryland (especially Prince George's County) regarding interstate placements.

- **Current Status:** On November 13, 2003, DHR Secretary Christopher J. McCabe and representatives from DHR and Prince George's County met with Dr. Olivia Golden and staff from the DC Child and Family Services Agency to discuss concerns about the requirements of the Interstate Compact on the Placement of Children and the use of Maryland as a resource for the placement of children in the care and custody of the DC Child and Family Services Agency. Issues that continue to remain unresolved include:
 - Clarification of the number of children placed in Maryland;

- Elimination of the backlog of unapproved placements;
- Reduction of emergency placements into Maryland without Maryland ICPC approval;
- Total elimination of illegal placements by DC;
- Elimination of the use of CFSA's unlicensed homes in Maryland;
- Joint recruitment of resource families;
- Establishment of an agreement for kinship placements; and
- Reimbursement of expenses to local Maryland government for the District's children residing in Maryland.

In addition, DHR and CFSA have agreed to work together to:

- 1) Develop a funding strategy to assist us with the effort to address the needs listed above;
- 2) Expand ICPC discussions to the state of Virginia to enlist their services for the placement of DC children; and
- 3) Clarify the data provided by CFSA so that the data elements are consistent in interpretation in both Maryland and DC.

Dr. Rosemarie DiMauro Satyshur, Executive Director of the Social Services Administration (SSA), will be the DHR point of contact for future discussions and will work with Brenda Donald, Chief of Staff for Dr. Olivia Golden, to develop and implement a workable strategy.

The November 2003 report of placements from the District of Columbia into Maryland indicated:

1,440 District children placed in Maryland
 754 Approved by the Maryland ICPC Office
 23 Referrals made to Md's ICPC Office for approval but still pending
 72 District emergency placements into Maryland in November 2003
 114 DC children over 18 years of age in placement in Maryland

The Statewide breakdown of known DC children in Maryland is as follows:

Anne Arundel	32
Baltimore County	27
Calvert County	5
Charles County	45
Frederick County	6
Harford County	2
Howard County	16
Montgomery County	55
Prince George's County	1237
Queen Anne's County	2
St. Mary's County	4
Worcester County	4
County unknown	14

At the State level, SSA's ICPC staff expends almost 3 FTE's on District of Columbia cases.

Approximately 54% of the District's foster care caseload is placed in Maryland. Prince George's County estimated in 2002 that more than 650 District foster children were enrolled in their schools. Although not easy to calculate, the cost of these placements also includes: Fire Department services for foster home fire inspections; Police and Juvenile services costs involved with these cases; local department of social services CPS referrals & investigations, clearances and home studies; and State Licensing, Inspection and Monitoring services for providers serving District children.

The Department of Human Resources remains committed to ensuring that all children placed in Maryland homes are safe and are there legally. Communication between DC, Prince George's County Government, and DHR continue in an effort to create an effective interstate placement process between Maryland and the District of Columbia.

MD CHESSIE Implementation

- The Maryland Children's Electronic Social Services Information Exchange system (**MD CHESSIE**) is Maryland's Statewide Automated Child Welfare Information System (**SACWIS**).
- The planning process began in 1999, with implementation of the Baseline system scheduled for FY2004. However, the state's budgetary situation last year necessitated funding containment on the state's share of the costs, yielding a stretched implementation schedule to FY2006-2007.
- As of September 30, 2003, total federal fund claims of \$14,022,956 had been made on behalf of the MD CHESSIE system. By the end of SFY 2004 (June 30, 2004), the Department estimates that the total federal fund contribution to CHESSIE will be \$16,826,309.
- The Baseline system will now also include the initially planned Major Release components: i.e., rather than implement the system only with Baseline components, additional components will be included (in earlier planning, these would have been subsequent Major Release components).
- Though initially building upon the West Virginia SACWIS system, Maryland's system will be unique and individualized for Maryland's specific structure and needs. In that sense, this is NOT the West Virginia system; it is the Maryland system. Essential design is nearing completion, with the oversight and re-checking provided by Joint Application Design (JAD) work groups that include Central office and local department staff.
- The system will most significantly cross-match program and fiscal components, and interface with Child Support, Family Investment, and Court arenas. Significant fiscal and program accountability gains should be realized, as well as enhanced communication, documentation, and work processes among caseworkers.
- When the design process is completed this year, it will be followed by phases of program testing (unit testing and system integration testing), and then User Acceptance Testing (UAT) to determine that all systems work properly.
- Data Conversion (preparation, clean-up, and conversion) will initiate May, 2005 and continue through 2006. Statewide staff training will be provided from September 2005 through late 2006.
- Implementation piloting will be initiated in early 2006. This will be followed by statewide roll-out, region by region, by December 2006.
- Post-implementation assessment and support will continue through June 2007.

An Overview for the House Judiciary Committee- 2004

Social Services Administration Mission

- To protect children and youth from abuse or neglect
- To assist families in crisis

Social Services Administration Goals

- Ensuring child safety
- Permanent homes for children
- Helping children achieve well-being through services to support their development.

Local Department of Social Services- Core Services

- Child Protective Services
- In-Home Family Preservation Services
- Kinship Care
- Foster Care
- Adoption Services

Child Protective Services

- Respond to allegations of abuse or neglect
- Ensure safety of children
- Assess needs of family and provide required services

Investigations By Year

SFY03- 32,936

SFY02- 32,506

SFY01- 31,420

SFY00- 30,890

In-Home Family Preservation Services

- Children who face possible placement due to risks of harm are identified and assessed.
- SFY03, 5,267 families received services designed to prevent placement.
- 92.8% of children who receive services do not enter foster care within one year (MFR measure).

Kinship Care Services

- Local departments look to families first when children must be removed from parents.
- Children receive the same level of health, mental health, and permanency planning services as regular foster care.
- Currently there are about 1,900 children living in kinship care placements, most in Baltimore city.

Foster Care Services

- Children who must be removed from their family because of abuse and neglect receive foster care services.
- Local departments use concurrent planning to achieve timely permanency for these children.
- As of June 2003, there were 10,773 children in out-of-home care.

Entries into foster care:

	MD	Balt.
SFY03	3,433	1,790
SFY02	3,500	1,765
SFY01	3,558	1,863
SFY00	3,977	2,246

Foster Care Services- Independent Living

- Services for children ages 14-21 that are designed to prepare a child for independence.
- Array of life skills education, counseling and assistance is available.
- 38% of foster care population is age 15 or older.

- Maryland state tuition waiver provides opportunity for college education for our teens.

Adoption Services

- As of October 2003, there were 1,932 children in foster care with a plan of adoption.
- Approximately 300 of these children do not have an adoptive home.
- During FFY2003, Maryland received \$712K in federal adoption incentive bonus for our performance.
- In SFY03, local departments finalized 764 adoptions.

Critical Issue: Voluntary Placements

- SB 458 *Children with Disabilities-Voluntary Placement Agreements* effective October 1, 2003.
- Department preparing emergency regulations to standardize response.
- Children presenting require high cost placement.
- Data to date: 27 agreements presented, 15 approved, 3 disapproved, 9 pending.

Critical Issue: District of Columbia Placements in Maryland

- District has been advised that Maryland expects:
 - Abide by the Interstate Compact;
 - End to illegal placements our state;
 - Reduction in emergency placements into MD;
 - Joint recruitment for resource families in Maryland;
 - Reimbursement to local government for children placed (Education, Health & Safety Inspections); and
 - Elimination of backlog of unapproved placements.

Critical Issue: Federal Child and Family Services Review

- Analyzed statewide data and evaluated 50 cases in Baltimore City, Allegany County and Anne Arundel County.
- Like the 44 states reviewed previously, we do not expect to achieve all federal outcomes.
- Results will identify both strengths and areas needing improvement.
- Maryland is awaiting results of the review and the opportunity to develop our program improvement plan (PIP).

Critical Issue: Child Welfare Workforce

- Administration has received authority to replace workers leaving workforce through retirement, disciplinary termination, transfer to another State agency or promotion from within. However, the Department must retain 119 vacant child welfare positions at all times to satisfy cost containment.
- Recent assignment of Title IV-E students to local departments with critical shortages.
- Continuously seeking improvements in manpower management to place more workers in field.

Critical Issue: Substance Abuse Initiatives

- HB7 *Child Welfare-Integration of Substance Abuse Treatment* has been implemented to the extent that funds allow.
- Cross training for staff, substance abuse screens for parents, and in-depth evaluations when needed are provided.
- 68 Treatment slots have been provided.
- Addiction Specialists are available in Baltimore City and Prince George's County.
- Other jurisdictions access the specialists assigned to the Family Investment office.

SOCIAL SERVICES ADMINISTRATION
N00B-CHILD WELFARE

Refer: Legislative Analyst Issue
Page 8

Budget Book: Part II, Pages 481-484

Analyst's Issue #1:

DHR SHOULD BE PREPARED TO DISCUSS WHY THE DEPARTMENT HAS BEEN UNABLE TO INCREASE THE PERCENTAGE OF CHILDREN WHO DO NOT ENTER FOSTER CARE AFTER RECEIVING IN-HOME FAMILY SERVICES.

Department's Response:

The Department is encouraged that the percent of children that do not enter foster care within one year of receiving In-Home Family Services has remained high. This percentage is consistent with that of the Family Preservation program administered by the Governor's Office for Children, Youth and Families through the Local Management Boards. A 92% success rate may well represent the field's collective ability to successfully address family dysfunction and to accurately predict the sustainability of improved behavior and conditions in families where a history of child abuse or neglect exists.

All families receiving In-Home Family Services have previously exhibited some degree of child abuse or neglect and, based on Maryland's child maltreatment risk assessment tool, are determined to be at high risk for recurrence. In-Home Family Services are provided to these 'high risk' families, and work is targeted on reducing behaviors and conditions assessed to be the basis of the risk. Past behavior is considered one of the best predictors of future behavior, and we should not be surprised that we cannot completely eliminate abusive or neglectful behaviors in people with a history of such actions.

The 8% of children who enter foster care during the 12 months following provision of in-home services represent the children whose parents or caregivers were not successful in sustaining the behavior/condition change that was demonstrated at case closure. Placement of these children should not be considered a failure of the program, but the appropriate safety response for children in situations where conditions have deteriorated placing them in danger.

SOCIAL SERVICES ADMINISTRATION
N00B-CHILD WELFARE

Refer: Legislative Analyst Issue
Page 11

Budget Book: Part II, Pages 436-439

Analyst's Issue #2:

DHR SHOULD COMMENT ON

- THE DEPARTMENT'S EXPECTATIONS WITH REGARD TO FINDINGS ANTICIPATED IN THE FEDERAL REPORT;
- LIKELY COMPOSITION AND TIMING OF THE DEPARTMENT'S PROGRAM IMPROVEMENT PLAN; AND,
- ANY ADDITIONAL RESOURCES NEEDED TO IMPLEMENT IT.

Department's Response:

No findings from the Child and Family Services Review (CFSR) have been issued by the federal government. However, the US Department of Health and Human Services (HHS) has identified one item that they want to re-examine before issuing their final report. This further examination will require an additional visit which has not yet been scheduled by HHS personnel. After issuance of the final report, Maryland will have 90 days to develop and submit a Program Improvement Plan (PIP).

At the end of the on-site portion of the Federal Child and Family Services Review (CFSR), the Children's Bureau of HHS gave a preliminary verbal report to the State. That information, along with our own statewide assessment, gives a general idea of where Maryland should focus its improvement efforts.

Maryland did well in the area of services to address child safety. We will strive to improve our assessments of risk to children and improve the response of community partners to assist child welfare agencies in this effort.

Permanency planning for children in foster care will be our biggest challenge. We need to reduce the time it takes to reunify children with parents, as well as the length of time required to finalize adoptions.

In order to promote child well-being, our system will look to improve the availability of community-based services and strengthen our monitoring of case progress.

The Department of Human Resources has already developed the structure it will use to craft a meaningful Program Improvement Plan which will include key stakeholders, such as the courts, schools and community providers in the process. Together we will identify

the strategies and measures of progress that will lead to better outcomes for children and families.

Without the final HHS report, it is difficult to estimate additional resources which will be needed to achieve the required improvement. However, it is reasonable to expect that additional staffing resources will be necessary to substantially improve case activities. These additional direct service resources could be provided through authority to refill vacant Child Welfare Services positions.

SOCIAL SERVICES ADMINISTRATION
N00B-CHILD WELFARE

Refer: Legislative Analyst Issue
Page 13

Budget Book: Part II, Pages 476-477

Analyst's Issue #3:

DHR SHOULD EXPLAIN AND PROVIDE DATA THAT ILLUSTRATES WHY THE DEPARTMENT BELIEVES THAT ITS CURRENT WORKING APPROPRIATION WILL BE ADEQUATE FOR FISCAL 2004.

Department's Response:

The Department agrees that Year-to-date available Foster Care & Adoptions data seems to suggest a potential funding shortfall for FY 2004. The Foster Care and Adoptions program has historically been under funded. FY 2004, however, witnessed the injection of \$36.0 million General Funds in the Governor's Allowance, increasing the amount of general funds available to the program to unprecedented levels.

The Department believes and will make its best efforts to close out FY 04 within its appropriated funds. Per State policy on Accounts Payable, Accrued Expenditures, and Encumbrances, we may have to defer accruals if funds are not available to cover all Foster Care and Adoptions payments. Efforts to honestly and adequately fund this program will take some time as we continue to see caseload fluctuations and increased care costs for Out-of-Home placements.

SOCIAL SERVICES ADMINISTRATION
N00B-CHILD WELFARE

Refer: Legislative Analyst Issue
Page 17

Budget Book: Part II, Pages 476-477

Analyst's Issue #4:

DHR SHOULD EXPLAIN AND PROVIDE DATA THAT ILLUSTRATES WHY THE DEPARTMENT BELIEVES THAT ITS ALLOWANCE FOR FOSTER CARE WILL BE ADEQUATE IN FISCAL 2005.

Department's Response:

For FY 2005, the Department remains hopeful that it will be able to fund the program, barring unanticipated caseload surges and increasing cost of care for placements. The Department will review both caseload and placement cost trends in the next few months. Following that review, revised estimates for FY 2005 will be made in conjunction with the Department of Budget and Management (DBM) based on emerging trends in caseloads and placement costs. The Department is quite appreciative of the Department of Legislative Services' analyst's concern to adequately fund this program.

SOCIAL SERVICES ADMINISTRATION
N00B-CHILD WELFARE

Refer: Legislative Analyst Issue
Page 20

Budget Book: Part II, Pages 481-484

Analyst's Issue #5:

DHR SHOULD COMMENT ON

- THE STATUS OF EXEMPTING CHILD WELFARE POSITIONS FROM THE HIRING FREEZE, ESPECIALLY IN JURISDICTIONS WITH GREATEST NEED; AND,
- THE WILLINGNESS TO TRANSFER POSITIONS TO AREAS AND JURISDICTIONS OF GREATEST NEED.

Department's Response:

The Department has successfully negotiated with the Department of Budget Management to exempt 173 critically needed Child Welfare positions since the hiring freeze was imposed in October 2001. Included in these exemptions were 90 positions which were filled by IV-E stipend students graduating with MSWs or BSWs from the University of Maryland School of Social Work.

In October 2003, the Department advised local departments of social services that it would generally support, after a thorough review on a case-by-case basis, filling positions vacated through retirement, disciplinary termination, transfer to another State agency, or promotion from within.

As positions vacate at the local level, the vacancies are pooled and, to the extent possible, can be re-assigned to the jurisdiction most in need of the position based on the caseload standards recommended by the Child Welfare League of America (CWLA). The Department supports the re-assignment of vacant positions to the jurisdictions which, based on CWLA caseload ratios, are most in need.

SOCIAL SERVICES ADMINISTRATION
N00B-CHILD WELFARE

Refer: Legislative Analyst Issue
Page 23

Budget Book: Part II, Pages 436-439

Analyst's Issue #6:

DHR SHOULD PUBLISH THE PERCENTAGE OF TITLE IV-E ELIGIBLE CHILDREN BY TYPE OF CARE INCLUDING REGULAR FOSTER CARE, INSTITUTIONAL CARE, OTHER FOSTER CARE, AND SUBSIDIZED ADOPTIONS.

Department's Response:

In response to a request from the Department of Legislative Services, a page will be added to the SSA Monthly Management Report (MMR) to show the percentage of children who are Title IV-E eligible for family foster care, purchase of (group) care, pre-adopt foster care, and subsidized adoption cases by quarter and local jurisdiction.

The new page will appear in the January 2004 issue of SSA's Monthly Management Report.

SOCIAL SERVICES ADMINISTRATION
N00B-CHILD WELFARE

Refer: Legislative Analyst Issue
Page 23

Budget Book: Part II, Pages 476-477

Analyst's Issue #7:

DHR SHOULD COMMENT ON AND PROVIDE DATA TO EXPLAIN

1. WHY TITLE IV-E ATTAINMENT DECREASED IN FISCAL 2003;
2. EFFORTS TO ENSURE THAT THE DEPARTMENT MAXIMIZES FEDERAL TITLE IV-E FUND ATTAINMENT;
3. THE PERFORMANCE OF THE CONTRACTOR HIRED TO ENSURE THAT ALL TITLE IV-E ELIGIBLE CHILDREN ARE IDENTIFIED.

Department's Response:

There are numerous reasons contributing to the decrease in Title IV-E attainment:

1. The average penetration rate in SFY 2002 was 67.75%. In SFY 2003, the average was 66.63%.
 - The 1996 Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) decreased the funding available to child welfare agencies by reducing the amount of federal reimbursement States are able to claim. Under Title IV-E, the federal government reimburses States for foster care and adoption assistance payments made on behalf of children from families that meet income eligibility requirements and also for children placed outside the home who are eligible for the Supplemental Security Income (SSI) program. As a result, States are able to collect federal reimbursement for fewer children, thus forcing States to make payment using State funds on behalf of many additional children. There are three main changes that affect the number of children for whom states can collect federal reimbursement.
 - First, PRWORA requires child welfare agencies to use 1996 AFDC income eligibility standards to determine if federal reimbursement is due. PRWORA does not include any adjustments to this eligibility standard for inflation. As prices and incomes have risen, fewer families can meet the 1996 AFDC eligibility standards. Foster care and adoption services for families that do not meet these standards must be funded by the States with no direct support from federal matching dollars.

- In Maryland, the income standards, i.e., “Schedule H,” for determining Title IV-E was last revised by Income Maintenance (now the Family Investment Administration) in 1994. The family income of children entering out-of-home care after July 1996 is measured against 1994 income in Maryland. Therefore, children from working families who exceed the 1994 AFDC income standards, though they may be in financial or emotional distress, or other significant factors wherein children enter foster care, are not eligible for Title IV-E.
 - Second, PRWORA reduced the number of children who qualify for SSI by eliminating the Individualized Functional Assessment (IFA) as a method of establishing SSI eligibility. Children who qualified on the basis of IFA results faced re-certification on the basis of much more restrictive medical listings.
 - Third, States often lose IV-E reimbursements made to support children who are non-qualified aliens. While PRWORA specifically affirms qualified immigrants' eligibility for the federal portion of foster care and adoption assistance payments, the law is unclear as to the eligibility of non-qualified aliens for these funds. The law lists the benefits for which non-qualified aliens are ineligible, including "retirement, welfare, health, disability...or any other similar benefit for which payments or assistance are provided to an individual household or family eligibility unit by an agency of the United States." It remains uncertain if foster care and adoption assistance payments are considered "similar benefits."
 - Discussions at a recent training for child welfare program and fiscal staff on “Managing Fiscal Issues in Child Welfare” revealed that in many States Title IV-E Eligibility rates have declined by an estimated 40% over the last several years, thereby lowering Title IV-E claims.
 - The Department anticipates that the percentage of children requiring high cost placement as a result of the Voluntary Placement of Children legislation which passed last year’s Session will increase the number of non-IV-E eligible children in out-of-home placement and further decrease the IV-E penetration rate for claiming federal funds.
2. The Department continues to examine means to maximize IV-E attainment through an internal workgroup.
 3. The Maximus contract assisted Maryland in improving its retroactive claiming of Title IV-E funds.

SOCIAL SERVICES ADMINISTRATION
N00B-CHILD WELFARE

Refer: Legislative Analyst Issue
Page 26

Budget Book: Part II, Pages 481-484

Analyst's Issue #8:

DHR SHOULD UPDATE THE COMMITTEES ON:

1. THE PROGRESS OF EFFORTS TO RE-ESTABLISH A RELATIONSHIP WITH THE DISTRICT THAT CONFORMS TO ICPC STANDARDS;
2. IDEAS, INITIATIVES, AND FUNDING UNDER CONSIDERATION FOR ALLEVIATING THE PROBLEM OF FOSTER CHILDREN FROM THE DISTRICT ILLEGALLY PLACED IN MARYLAND; AND,
3. THE OPPORTUNITIES AND CHALLENGES OF ENSURING THE SAFETY OF THE AFFECTED CHILDREN.

Department's Response:

DHR Secretary McCabe and SSA Executive Director Dr Satyshur have met on several occasions with Dr Olivia Golden from the District of Columbia's Child and Family Services Agency (CFSA) and Prince George's County officials to negotiate the parameters of an agreement between the District and Maryland. This group has established a subcommittee that is working diligently to allay the issues related to the safety of the District's children in Maryland as well as to undergird the costs.

- The Department and the District are looking at opportunities to conduct a pilot in Maryland to equalize the payments paid to families by both the District and Maryland. The plan would require that private or Federal funding supplement the increase payment of the Foster Care board rate in Maryland to match the rate currently being paid in the District.
- The District has rewritten their contracts with the Maryland licensed agencies to ensure that the safety of the children is maintained. These new contracts are worded in such a manner that Maryland providers will have total responsibility for the families they serve for the District's CFSA.
- The committee has made significant impact on resolving the issue of providing consistent interpretation of the data between the District and Maryland.
- The committee has worked to eliminate the use of unlicensed CFSA homes in Maryland and have made significant strides to reduce the numbers of unauthorized District children in Maryland. The District is no longer studying Maryland families, except those involving kin, to be used as resource homes. Instead, the District is referring such families to Maryland

SOCIAL SERVICES ADMINISTRATION
N00B-CHILD WELFARE

Refer: Legislative Analyst Issue
Page 27

Budget Book: Part II, Pages 481-484

Analyst's Issue #9:

DHR SHOULD COMMENT ON PROGRESS MADE IN ADDRESSING THE ISSUES RAISED IN THE MAY 2002 FOSTER CARE PERFORMANCE AUDIT, PARTICULARLY ON THE ITEMS ON WHICH THE FOLLOW-UP REVIEW COULD NOT DOCUMENT PROGRESS, I.E.,

- SPECIAL HEALTH NEEDS ADDRESSED;
- RECOMMENDED THERAPY RECEIVED;
- FACE-TO-FACE MEETINGS WITH THE PROVIDER EVERY THREE MONTHS; AND,
- CASE RE-ASSESSMENT PERFORMED TIMELY.

Department's Response:

The follow-up review of the Foster Care Performance Audit was conducted in early CY 2003 at which time complete results for all jurisdictions were not available. Since that time, SSA has continued to monitor compliance on all items from the performance audit and can now provide results from all jurisdictions. The following areas represent items which were not available at the time of follow-up review:

- **Special health needs addressed** – The Department of Human Resources' Social Services Administration continues to partner with the Department of Health and Mental Hygiene to identify placements for special needs children. Annual physical examinations are currently at 80.6% compliance, although there continues to be a need for specialty health care providers in rural areas.
- **Recommended therapy received** – The 2003 Child Welfare and Adult Services Performance Review System (CAPS) annual results indicate a 96.3% compliance rate.
- **FACE-TO-FACE meetings with providers every three (3) months** – FY 2003 CAPS annual results indicate a 90.8% compliance rate.
- **Case reassessment performed timely** – Information obtained from the Citizen Review Board for Children indicates a 95% compliance rate.

SOCIAL SERVICES ADMINISTRATION
N00B-CHILD WELFARE

Refer: Legislative Analyst Issue
Page 28

Budget Book: Part II, Pages 481-484

Analyst's Issue #10:

DHR SHOULD UPDATE THE COMMITTEES ON THE PDA INITIATIVE, INCLUDING THE EXTENT TO WHICH THE APPROPRIATE TRAINING, SOFTWARE, AND COMPUTER INTERFACES HAVE BEEN PROVIDED TO LOCAL DEPARTMENTS.

Department's Response:

The vast majority of the caseworkers in Maryland have Personal Data Assistants (PDA) and are using them in support of their field activities. The remaining units in Baltimore City will be installed this month (February 2004).

The PDAs are equipped with software that enables caseworkers to manage their calendars, maintain address information, take notes on a note pad, and photograph children during caseworker visits. Additional functionality easily synchronizes field data into their desktop computer.

Workers were given formal training on how to use the PDAs at the beginning of the project. The training was videotaped and copied onto CD-ROM disks which were provided to local departments. Workers who missed the training or need a refresher on the use of the PDA can watch the training CD at their desk. Also, the training materials and reference manual are available to all caseworkers on the DHR Intranet.

The Department has made the commitment to integrate MD CHESSIE functionality with the PDAs. Planning and development of this interface is underway.

SOCIAL SERVICES ADMINISTRATION
N00B-CHILD WELFARE

Refer: Legislative Analyst Recommended Action
Page 3

Budget Book: Part II, Pages 476-477

Analyst's Recommended Action #1:

AMEND LANGUAGE TO REQUIRE THE DEPARTMENT TO SUBMIT
INFORMATION RELATED TO ACCRUALS FOR SERVICES PROVIDED NEAR
THE END OF THE FISCAL YEAR.

Department's Response:

The Department concurs with the Analyst's recommendation.